



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
BREATH ALCOHOL PROGRAM
DATAMASTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 12:23 pm, Sep 08, 2014

REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

DATAMASTER SN 201264	NAME OF AGENCY National Park Service	DATE OF INSPECTION 09/05/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 100 Washington Avenue, St. Louis MO 63102		TIME OF INSPECTION 10:00 pm

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) 09/05-2014 @ 22:23 hours
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 49 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER Guth Labs Inc. LOT # 14110 EXP. DATE 05/01/2016	
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN SD2735 EXP. DATE 01/15/2015	
<input checked="" type="checkbox"/> CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)	
Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE	
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE	
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE	


TEST 1 .101	TEST 2 .102	TEST 3 .103
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☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS 1	(0-.04) 0	(.05-.09) 0	(.10-.14) 0	(.15-.19) 0	OVER .19 0
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS
(USE OTHER SIDE IF NECESSARY).

INSPECTING OFFICER	
SIGNATURE  # 870	PRINT FULL NAME Thad Lucas
TYPE II PERMIT NUMBER/EXPIRATION DATE 240228 06/19/2016	TELEPHONE NUMBER (314) 655-1764

RETURN COMPLETED REPORT TO THE: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Blvd.
Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14110 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 5, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1206% (w/vol) ethyl alcohol. The expiration date for this lot number is May 1, 2016 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
NATIONAL PARK SERVICE ST. LOUIS

BAC DATAMASTER SERIAL NUMBER 201264
09/05/14

ARREST TIME: 22:00
SUBJECT NAME:
DOE/JOHN/A
DOB: 01/01/71 SEX: M
STATE/D.L.: MO/123456
ARRESTING OFFICER:
LUCAS/THAD/D
OFFICER I.D.: 890
TESTING OFFICER:
LUCAS/THAD/D
OFFICER I.D.: 890
PERMIT NUMBER: 240228
EXPIRATION DATE: 06/19/16
MISCELLANEOUS DATA:
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	22:05
INTERNAL STANDARD	VERIFIED	22:05
RADIO INTERFERENCE		

OPERATOR SIGNATURE

Card Stock No.
60021

890

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
NATIONAL PARK SERVICE ST. LOUIS

BAC DATAMASTER SERIAL NUMBER 201264
09/05/14

TESTING OFFICER:
LUCAS/THAD/D
OFFICER I.D.: 890
PERMIT NUMBER: 240228
EXPIRATION DATE: 06/19/16
MISCELLANEOUS DATA:
MAINT TEST

--- SUPERVISOR MODE ---

BLANK TEST	.000	22:27
INTERNAL STANDARD	VERIFIED	22:27
EXTERNAL STANDARD	.101	22:28
BLANK TEST	.000	22:29
EXTERNAL STANDARD	.102	22:29
BLANK TEST	.000	22:30
EXTERNAL STANDARD	.103	22:30
BLANK TEST	.000	22:31

N = 3

SIM. = .1

AVG. = .102

OPERATOR SIGNATURE

Card Stock No.
60021

890

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
NATIONAL PARK SERVICE ST. LOUIS

BAC DATAMASTER SERIAL NUMBER 201264

09/05/14

22123

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS

SAMPLE CHAMBER: 49c

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGH
IJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnopqrstuvwxyz
pqrstuvwxyz{|}~

OPERATOR SIGNATURE

[Signature] #890

Card Stock No.
50021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

2

PERMIT
TYPE II
THAD LUCAS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

DATAMASTER


for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

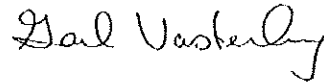
DATE 6/19/2014

NUMBER 240288

EXPIRES 6/19/2016

MO 580-0771 (5-10)


DIRECTOR OF STATE PUBLIC HEALTH LABORATORY


DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

**STATE OF MISSOURI**
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.



Operator LUCAS, THAD
Permit No 240288
Date Issued 6/19/2014 Date Expires 6/19/2016